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APPLICANTS

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**** CONTINUING DATA ******* *I.A.*

**** FOREIGN APPLICATIONS ******* *I.A.*
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 4	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> <i>I.A.</i> Examiner's Signature Initials				

ADDRESS

43076

TITLE

Laser measurement apparatus

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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